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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA, ROME DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exan	e the name that is on government-issued ire identification (for nple, your driver's se or passport).	Kristi First name Joy	First name
			Middle name	Middle name
		g your picture tification to your meeting	Harness	
		the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All c	ther names you have I in the last 8 years		
	maio assu	de your married or den names and any imed, trade names and g business as names.		
	sepa a co	NOT list the name of any trate legal entity such as reporation, partnership, LC that is not filing this ion.		
3.	you num Indi	r the last 4 digits of r Social Security ber or federal ridual Taxpayer tification number	xxx-xx-5722	

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Debtor 1 Harness, Kristi Joy Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number		
	(EIN), if any.	EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1504 Ashton Woods Way Dalton, GA 30720-7262	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Whitfield	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Harness, Kristi Joy Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Cha	pter 12					
		_	pter 13					
8.	How you will pay the fee	– I	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money or If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
				the fee in installments. If your stallments (Official Form 103		this option, sign a	nd attach the <i>Applicatio</i>	on for Individuals to Pay The
		r y	ot required to our family siz	o, waive your fee, and may do ze and you are unable to pay th Chapter 7 Filing Fee Waived (C	so only if y ne fee in in	our income is less stallments). If you	than 150% of the office choose this option, you	cial poverty line that applies to
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes						
				Northern District of				
			-	Georgia - Rome		0/04/40		D4C 4000E MCD
			District	Division	When	2/01/16	Case number	R16-40235 -MGD
			District		_ When	_	Case number	_
			District		_ When		Case number	
10.	Are any bankruptcy cases pending or being filed by	■ No						
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes						
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
11.	Do you rent your	□ No.	Go to li	ine 12.				
	residence?	■ Yes	Has yo	ur landlord obtained an evicti	on judgme	ent against you?		
		— 168.		No. Go to line 12.	, 0	<i>,</i>		

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Document Page 4 of 44 Debtor 1 Case number (if known) Harness, Kristi Joy Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed 13. Are you filing under Chapter 11 of the under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are Bankruptcy Code, and are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow you a small business statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor or a debtor as defined by 11 U.S. C. § I am not filing under Chapter 11. ■ No. 1182(1)? For a definition of small I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do ☐ Yes. not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat of Yes. imminent and identifiable What is the hazard? hazard to public health or safety? Or do you own If immediate attention is any property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Harness, Kristi Joy Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Case number (if known) Harness, Kristi Joy Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are ☐ Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ☐ No are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kristi Joy Harness Signature of Debtor 2 Kristi Joy Harness Signature of Debtor 1 Executed on Executed on June 29, 2023 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Harness, Kristi Joy Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael D. Hurtt	Date	June 29, 2023	
Signature of Attorney for Debtor	<u></u>	MM / DD / YYYY	
Michael D. Hurtt			
Printed name			
Hurtt and Johnson, LLC			
Firm name			
PO Box 1304			
Dalton, GA 30722-1304			
Number, Street, City, State & ZIP Code			
(700) 000 5405	E 7 11	!l@htil	
Contact phone (706) 226-5425	Email address	mike@hurttlaw.com	
380112			
Bar number & State			

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		Docume	ent Page 8 of 44		
Fill in t	his information to identi	fy your case and this filing	g:		
Debtor 1	Kristi Joy Harnes	SS Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA, ROME DIVISION		
					_
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	erty			12/15
In each category,	separately list and describ	e items. List an asset only or	nce. If an asset fits in more than on		
			I people are filing together, both are 1. On the top of any additional pages		
Answer every que		a separate sneet to this form	. On the top of any additional page:	s, write your name and case	number (ii known).
Part 1: Describe	n Each Posidoneo Building	Land or Other Peal Estate	You Own or Have an Interest In		
Part I. Describe	e Lacii Residence, Bullullig	, Land, or Other Real Estate	Tou Own or have an interest in		
1. Do you own or	have any legal or equitable	interest in any residence, b	uilding, land, or similar property?		
■ No. Go to Pa	ort 2				
_					
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
			cles, whether they are registere G: Executory Contracts and Unex		cles you own that
someone else un	ves. II you lease a verilcle,	also report it on scriedule t	3. Executory Contracts and Onex	pireu Leases.	
3. Cars, vans, t	rucks, tractors, sport uti	ility vehicles, motorcycles	\$		
□ No					
_					
Yes					
				Do not deduct secured cl	aims or exemptions. Put
3.1 Make:			est in the property? Check one	the amount of any secure	ed claims on Schedule D:
Model:		Debtor 1 only		Creditors Who Have Clair	ims Secured by Property.
Year:	ata milaana	Debtor 2 only		Current value of the	Current value of the
Approxima Other info	ate mileage:	Debtor 1 and D	ebtor 2 only the debtors and another	entire property?	portion you own?
	ni Cooper	At least one of t	.ne debtors and another		
2012 1011	ili Goopei	☐ Check if this is	s community property	\$3,500.00	\$3,500.00
		(see instructions)			
/ Watercraft a	ircraft motor homes Al	TVs and other recreations	Il vehicles, other vehicles, and a	accesories	
•			els, snowmobiles, motorcycle acces		
•			•		
No					
☐ Yes					
5 Add the doll	ar value of the portion y	ou own for all of your ent	tries from Part 2, including any	entries for pages	¢2 500 00
					\$3,500.00
	e Your Personal and House				
Do you own or	have any legal or equita	able interest in any of the	following items?		Current value of the

Official Form 106A/B Schedule A/B: Property page 1

Do not deduct secured claims or exemptions.

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De	ebtor 1	Harness, K	risti Joy	Doddinent		Case number (if known)			
6.		ousehold goods and furnishings E <i>xampl</i> es: Major appliances, furniture, linens, china, kitchenware 기 No							
		Describe	Misc. Househo	old goods and furnish	nings		\$3,000.00		
7.	□ No	es: Televisions a	Il phones, cameras, r	o, stereo, and digital equip media players, games	ment; computers, printer	rs, scanners; music collec	tions; electronic devices		
			Misc. Electron	ics			\$1,000.00		
8.	Example No		d figurines; paintings, memorabilia, collectit		oks, pictures, or other ar	t objects; stamp, coin, or l	paseball card collections; other		
9.	Example No	ent for sports a es: Sports, photo instruments Describe		d other hobby equipment; I	picycles, pool tables, gol	f clubs, skis; canoes and	kayaks; carpentry tools; musical		
	■ No	oles: Pistols, rifle	es, shotguns, ammun	ition, and related equipme	nt				
	Examp ☐ No	oles: Everyday cl	othes, furs, leather co	pats, designer wear, shoes	accessories				
	Yes.	Describe					# 500.00		
			Misc. Wearing	Apparel			\$500.00		
12.	□ No Î		welry, costume jewelr Misc. Jewelry	y, engagement rings, wedd	ling rings, heirloom jewe	Iry, watches, gems, gold,	silver \$500.00		
13.	Examp ■ No	rm animals oles: Dogs, cats, Describe	birds, horses						
14.	■ No	her personal ar		you did not already list,	including any health a	ids you did not list			
15				s from Part 3, including		ou have attached for	\$5,000.00		
Pa	art 4: De	scribe Your Fina	ncial Assets						
Do	o you ow	n or have any	legal or equitable in	terest in any of the follo	wing?		Current value of the portion you own?		

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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De	ebtor 1	Harness, Kristi	Joy	Case number (if known)	
16.	Cash				
	_ ′	oles: Money you have	n your wallet, in your home, in a	safe deposit box, and on hand when you file your petition	
	■ No				
	☐ Yes				
17.		ts of money			
	Examp		s, or other financial accounts; counts with the same in the same i	ertificates of deposit; shares in credit unions, brokerage houses, and other similar	
	□ No	mstitutions. If yo	u nave munipie accounts with t	The Same institution, list each.	
	Yes			Institution name:	
		1	7.1. Checking Account	Checking Bank account with Wells Fargo	\$20.00
18	Ronds	mutual funds or ni	ıblicly traded stocks		
10.			stment accounts with brokerage	firms, money market accounts	
	■ No				
	☐ Yes		Institution or issuer name		
19.	Non-pu		and interests in incorporated	and unincorporated businesses, including an interest in an LLC, partnership	, and
	■ No				
	☐ Yes.	Give specific informa	ation about them		
			Name of entity:	% of ownership:	
20.	Negoti	<i>able instrument</i> s inclu	de personal checks, cashiers' c	and non-negotiable instruments hecks, promissory notes, and money orders. someone by signing or delivering them.	
	■ No	ogottable motramente	are those you durnot transfer to	someone by signing or delivering them.	
	_	Give specific informat	ion about them		
			Issuer name:		
21	Dotiron	nent or pension acc	ounte		
۷١.				thrift savings accounts, or other pension or profit-sharing plans	
	■ No				
	☐ Yes.	List each account sep	arately.		
		Т	ype of account:	Institution name:	
22.		y deposits and prep			
		•	,	u may continue service or use from a company	
	■ No	iles. Agreements with	iandiords, prepaid terit, public d	tilities (electric, gas, water), telecommunications companies, or others	
				Institution name or individual:	
23.	_	es (A contract for a p	eriodic payment of money to you	i, either for life or for a number of years)	
	■ No □ Yes	Issuer	name and description.		
24.		s in an education IR C. §§ 530(b)(1), 529A		d ABLE program, or under a qualified state tuition program.	
	☐ Yes	Institu	tion name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or future	interests in property (other th	nan anything listed in line 1), and rights or powers exercisable for your benef	it
		Give specific informa	ation about them		
26.	Patents	s, copyrights, trader	narks, trade secrets, and othe	er intellectual property	
	Examp			royalties and licensing agreements	
	NI-				

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

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De	btor 1	Harness, Kristi Joy		Case number (if known)	
		s, franchises, and other general intan les: Building permits, exclusive licenses,		licenses, professional licenses	
		Give specific information about them			
Мо	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
-	■ No	unds owed to you Give specific information about them, inclu	uding whether you already filed the retur	rns and the tax years	
İ	■ No	support les: Past due or lump sum alimony, spou Give specific information	usal support, child support, maintenand	ce, divorce settlement, property settle	ement
!	Examp ■ No	mounts someone owes you les: Unpaid wages, disability insurance pa unpaid loans you made to someone Give specific information		cation pay, workers' compensation,	Social Security benefits;
1	Examp ■ No	s in insurance policies fes: Health, disability, or life insurance; he lame the insurance company of each pol Company name:	icy and list its value.	neowner's, or renter's insurance Beneficiary:	Surrender or refund value:
	If you a died. ■ No	erest in property that is due you from re the beneficiary of a living trust, expect		r are currently entitled to receive prope	erty because someone has
1	Examp ■ No	against third parties, whether or not y les: Accidents, employment disputes, ins		mand for payment	
	■ No	ontingent and unliquidated claims of e	every nature, including counterclaim	ns of the debtor and rights to set of	ff claims
	■ No	ancial assets you did not already list Give specific information			
36.		ne dollar value of all of your entries fro . Write that number here			\$20.00
Par	rt 5: Des	cribe Any Business-Related Property You	Own or Have an Interest In. List any real	estate in Part 1.	
_	Do you o ■ No. Go	wn or have any legal or equitable interest i	n any business-related property?		

page 4

Schedule A/B: Property

☐ Yes. Go to line 38.

Official Form 106A/B

Deb	tor 1	Harness, Kristi Joy	Paye 12 01 2	Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property You Corou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. [Do you	ı own or have any legal or equitable interest in any farm- oı	commercial fishing	-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? bles: Season tickets, country club membership			
	Lxamı, INo	bies. Season tickets, country dub membership			
		Give specific information			
54.		the dollar value of all of your entries from Part 7. Write that List the Totals of Each Part of this Form	number here		\$0.00
55.	Part '	1: Total real estate, line 2			\$0.00
56.		2: Total vehicles, line 5	\$3,500.00		
57.	Part 3	3: Total personal and household items, line 15	\$5,000.00		
58.	Part 4	4: Total financial assets, line 36	\$20.00		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$8,520.00	Copy personal property total	\$8,520.00

\$8,520.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

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		Docume	nt Page 13 of 44	
Fill in th	is information to identi	fy your case:		
Debtor 1	Kristi Joy Harnes	ss		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA, ROME DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo				

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Misc. Household goods and furnishings	\$3,000.00	•	\$3,000.00	O.C.G.A. § 44-13-100(a)(4)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Misc. Electronics Line from Schedule A/B 7.1	\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
LITE HOIT SCHEdule AVE. 1.1			100% of fair market value, up to any applicable statutory limit	
Misc. Wearing Apparel	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(4)
Line nom Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit	
Misc. Jewelry Line from Schedule A/B 12.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(5)
Ellie Holli Gonedale A/Z. 12.1			100% of fair market value, up to any applicable statutory limit	
Checking Bank account with Wells Fargo	\$20.00		\$20.00	O.C.G.A. § 44-13-100(a)(6)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

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De	btor 1	Harness, Kristi Joy	Case number (if known)	
3.	•	you claiming a homestead exemption of more than \$189,050? ject to adjustment on 4/01/25 and every 3 years after that for cases filed on or aft	er the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 days be	efore you filed this case?	
		□ No		
		☐ Yes		

Official Form 106C

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		Document	Page 15	of 44		
Fill in this in	nformation to ident	ify your case:				
Debtor 1	Kristi Joy Harne	PSS Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF G	EORGIA, RO	ME DIVISION		
Case number						if this is an ded filing
Official Form	106D					
Schedule D	: Creditors	Who Have Claims	Secure	d by Property	y	12/15
needed, copy the Addi known). 1. Do any creditors ha D No. Check thi	itional Page, fill it out, ve claims secured by is box and submit this	s form to the court with your other s	this form. On	the top of any additional r	pages, write your name	
Yes. Fill in all	of the information be	low.				
Part 1: List All S	ecured Claims			Column A	Column B	Column C
for each claim. If more	than one creditor has	ore than one secured claim, list the creat particular claim, list the other creditor all order according to the creditor 's nar	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Exeter Final	nce LLC	Describe the property that secures	the claim:	\$6,736.00	\$3,500.00	\$3,236.00
PO Box 166 Irving, TX 75 Number, Street, Cit		2012 Mini Cooper As of the date you file, the claim is: apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	: Check all that			
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as car loan)	mortgage or se	ecured		
☐ Debtor 1 and Debto☐ ☐ At least one of the of	•	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit	echanic's lien)			
☐ Check if this claim community debt		Other (including a right to offset)	Automobi	ile		
Date debt was incurre	ed	Last 4 digits of account num	nber			
	=	ımn A on this page. Write that numb	er here:	\$6,736.		
Write that number he		dollar value totals from all pages.		\$6,736.	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	t Page 16 of 4	14		
Fill in this in	formation to identify your cas					
Debtor 1	Kristi Joy Harness					
	First Name	Middle Name	Last Name		}	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the: NC	RTHERN DISTRICT OF	F GEORGIA, ROME DI	VISION		
Case number (if known)					. –	Check if this is an amended filing
Official For	m 106E/F E/F: Creditors Who	Have Unsecure	ed Claims			12/15
any executory cor Schedule G: Exec D: Creditors Who	nd accurate as possible. Use Part ntracts or unexpired leases that o utory Contracts and Unexpired L Have Claims Secured by Propert Page to this page. If you have no nown).	ould result in a claim. Als eases (Official Form 106G y. If more space is needed	so list executory contract 6). Do not include any cre d, copy the Part you need	ts on Schedule A/B: P editors with partially so I, fill it out, number the	roperty (Office ecured claims e entries in the	ial Form 106A/B) and on s that are listed in Schedule e boxes on the left. Attach
Part 1: List	All of Your PRIORITY Unsecu	red Claims				
1. Do any creditors have priority unsecured claims against you?						
☐ No. Go to	Part 2.					
Yes.						
identify what t possible, list t	ur priority unsecured claims. If a type of claim it is. If a claim has both the claims in alphabetical order accorn one creditor holds a particular claims.	n priority and nonpriority am ording to the creditor 's nam	ounts, list that claim here a ie. If you have more than to	and show both priority a	nd nonpriority	amounts. As much as
	nation of each type of claim, see the					
(3 3 3 3 7 3 7 3 7 3 7 3 7 3 7 3 7 3 7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Total claim	Priority amount	Nonpriority amount
	ia Department of Revenue	e Last 4 digits of ac	count number	\$0.00		\$0.00 \$0.00
•	Creditor's Name Bankruptcy	When was the deb	nt incurred?			
1800 C	Century Blvd NE Ste 9100 a, GA 30345-3202	mon was the ask			-	
	Street City State Zip Code	As of the date you	ı file, the claim is: Check	all that apply		
Who incurre	ed the debt? Check one.	☐ Contingent				
Debtor 1	only	☐ Unliquidated				
Debtor 2	□ Debtor 2 only □ Disputed					
Debtor 1	☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim:					
_	☐ At least one of the debtors and another ☐ Domestic support obligations					
_	this claim is for a community de	ebt Taxes and certa	ain other debts you owe the	e government		
	subject to offset?	_	h or personal injury while y	•		
■ No	•	☐ Other. Specify	. ,,,			
☐ Yes			State Taxes			

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Debtor 1 Harness, Kristi Joy Case number (f known)					
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$2,400.00	\$2,400.00	\$0.00
	PO Box 7346 Philadelphia, PA 19101-7346				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply		
V	Who incurred the debt? Check one.	☐ Contingent			
I	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt	■ Taxes and certain other debts you owe the g	overnment		
ls	s the claim subject to offset?	\square Claims for death or personal injury while you	were intoxicated		
	No	☐ Other. Specify			
	Yes	Federal Taxes			
4. Lis	Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other	aim. For each claim listed, identify what type of clai	im it is. Do not list claims a	already included in Part	1. If more Page of Part
4.1	Capital One Bank USA N.A	Last 4 digits of account number			\$1,400.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30285	When was the debt incurred?			. ,
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agr report as priority claims	reement or divorce that yo	u did not	
	No	Debts to pension or profit-sharing plans, a	and other similar debts		
	Yes	■ Other. Specify Credit Card			

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Debto	r1 Harness, Kristi Joy	Case number (f known)				
4.2	Credit One Bank	Last 4 digits of account number	\$1,500.00			
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 98873	When was the debt incurred?				
	Las Vegas, NV 89193-8873 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card				
4.3	Dept of Ed/Nelnet	Last 4 digits of account number	\$48,000.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	121 S 13th St					
	Lincoln, NE 68508-1904	_				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	■ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify				
		4 Loans				
4.4	Erlanger Heart & Lung Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00			
	The second of th	When was the debt incurred?				
	979 E 3rd St # C-520 Chattanooga, TN 37403-2136					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐Yes	Other Specify				

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Debto	r1 Harness, Kristi Joy	Case number (f known)				
4.5	Erlanger Hospital	Last 4 digits of account number	\$10,000.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	975 E 3rd St Chattanooga, TN 37403-2147 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	<u> </u>	П				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical				
4.6	Erlanger Orthoapedics Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00			
	Nonpholity Oreuloi's Name	When was the debt incurred?				
	975 E 3rd St Chattanooga, TN 37403-2147					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical				
4.7	Hamilton Medical Center	Last 4 digits of account number	\$30,000.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 1168					
	Dalton, GA 30722-1168					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
		□ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	☐ Yes	■ Other. Specify Medical Services				

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Synchrony Bank	Last 4 digits of account number	\$5
Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred?	
PO Box 965061		
Orlando, FL 32896-5061	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Dental	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,400.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,400.00
					Total Claim
Total claims	6f.	Student loans	6f.	\$	48,000.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	ф ——	
				Ψ	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	49,900.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	97,900.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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			1 0 0 0 0 0 1 1 1		
Fill in th	Fill in this information to identify your case:				
Debtor 1	Kristi Joy Harne	SS			
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA, ROME DIVISION		
Case number _				☐ Check if this is ar	
(,				amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	-

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		Docume	nı Page 22 ol	44	
F	ill in this information to identi	fy your case:			
Debtor 1	Kristi Joy Harne	ee e			
DODIO! 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA, ROME I	DIVISION	
0	-h				
Case nun (if known)	nber				☐ Check if this is an
					amended filing
					-
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
case num	ber (if known). Answer every you have any codebtors? (If	question.			onal Pages, write your name and
=					
■ No					
ш үе	S				
	thin the last 8 years, have you ornia, Idaho, Louisiana, Nevada				tes and territories include Arizona,
■ No	o. Go to line 3.				
_	s. Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
	o. Dia your opouse, former opou	oc, or logal equivalent live w	in you at the time:		
line 2 106D		nat person is a guarantor	or cosigner. Make sure	you have listed the cred	h you. List the person shown in itor on Schedule D (Official Forn E/F, or Schedule G to fill out
	Column 1: Your codebtor			Column 2: The credit	or to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules t	hat apply:
3.1				☐ Schedule D, line	
0.1	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	
	Negative			_	
	Number Street City	State	ZIP Code		
	•				
				Пол	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
				- Schedule G, illie	
	Number Street City	State	ZIP Code		

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=:11	in this information to identify					1				
	in this information to identify your car btor 1 Kristi Joy Ha									
_	btor 2				_					
Uni	ited States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF GEORGIA, R	ROME						
	se number nown)		-				nended plemen	ıt showinç	g postpetition owing date:	chapter 13
<u>O</u>	fficial Form 106I					MM /	DD/ YY	/YY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. On the control of th	spouse is not filing wit	h you, do not inclu	de informa	atior	about your ase number	spous (if kno	e. If more wn). Ans	e space is ne	eded,
	information.								iing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	□ Not employed Accounts receivable			Employ Not em	ployed		
	employers.	Occupation	Accounts rece							
	Include part-time, seasonal, or self-employed work.	Employer's name	Techniplas US	S, LLC						
	Occupation may include student or homemaker, if it applies.	Employer's address	1799 Kimberly Dalton, GA 30		i					
		How long employed th	nere? 1 mor	nths						
Pa	rt 2: Give Details About Mont	thly Income								
	mate monthly income as of the dat iss you are separated.	e you file this form. If y	ou have nothing to re	eport for an	y line	e, write \$0 in th	ne spac	e. Includ	e your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the information t	for all emplo	oyers	for that perso	on on th	ne lines b	elow. If you ne	ed more
						For Debtor	1		btor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	5,000	.00	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	5,000.0	0	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Harness, Kristi Joy	_		Case num	nber (<i>if kne</i>	own)				
	Сор	y line 4 here	4.		For De	btor 1 5,000	.00		r Debtor n-filing s		<u> </u>
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a 5b 5c 5c 5e 5f 5g 5h	o. o. d. e.	\$ \$ \$ \$ \$ \$ \$ \$ \$	0 0 450 0	.00 .00 .00	\$ _ \$ \$ _ \$ \$ _ +		N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,550	00	\$_		N/A	<u> </u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,450	00	\$_		N/A	<u>\</u>
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	86 86 86 86 86	o. d. e.	\$ \$ \$ \$ \$	0 0 0	.00	\$ _ \$ _ \$ \$ \$ \$		N/A N/A N/A N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g 8h	ฐ. า.+	\$		00	+ \$_		N/A	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Г	\$		00	\$_		N/	_
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	3,4	50.00	+ \$		N/A	= \$ _	3,450.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available:	epend						dule J. 11.	_+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result in the summary of Schedules and Statistical Summary of Certain							ies 12.	\$	3,450.00
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	,							Combi month	ined ly income
		Yes. Explain: The information on schedule I & Schedule J is a couple of months and just stared a new job a co \$60,000.									

Official Form 106l Schedule I: Your Income page 2

Fill in	n this informa	tion to identify you	ur case:					
Debte	or 1	Kristi Joy Ha	rness			Che	eck if this is:	
Debte	or 2							ing postpetition chapter 13
(Spo	use, if filing)						expenses as of the	following date:
Unite	ed States Bankr	ruptcy Court for the:	NORTH DIVISIO	HERN DISTRICT OF GEOF DN	RGIA, ROME		MM / DD / YYYY	
Case (If kn	e number own)							
		rm 106J						
		J: Your E						12/15
info	rmation. If m nown). Answ	ore space is need er every question ibe Your Housel	ded, attad n.	If two married people are th another sheet to this fo	filing together, botl orm. On the top of a	h are equa ny additio	lly responsible for s nal pages, write you	supplying correct ur name and case number
1.	Is this a join							
	■ No. Go to □ Yes. Doe	o line 2. s Debtor 2 live ir	ı a separa	te household?				
	□ N □ Y	-	t file Offici	al Form 106J-2, <i>Expenses t</i>	or Separate Househ	oldof Debte	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					_	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
•	_							☐ Yes
3.	expenses of	penses include f people other th d your dependen	an \square	No Yes				
Part		ate Your Ongoin						
ехре				ptcy filing date unless yo is filed. If this is a supple				
				overnment assistance if yed it on Schedule I: Your I				
	cial Form 10		re morade	a it off seriedate i. Todi ii	icome		Your exp	enses
4.		or home ownersh d any rent for the		ses for your residence. Include.	clude first mortgage	4.	\$	1,000.00
	If not includ	led in line 4:						
		estate taxes				4a.	:	0.00
		rty, homeowner's,				4b.	·	0.00
		maintenance, repowner's association				4c. 4d.	·	0.00 0.00
5.				ur residence. such as hom	e equity loans	4u. 5.		0.00

Debtor	1 Harness, Kristi Joy	Case number (if known)	
6. U t	tilities:		
6a	a. Electricity, heat, natural gas	6a. \$	195.00
6b	o. Water, sewer, garbage collection	6b. \$	40.00
6c	c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	285.00
6d	d. Other. Specify:	6d. \$	0.00
7. F c	ood and housekeeping supplies	7. \$	695.00
B. Cł	hildcare and children's education costs	8. \$	0.00
9. CI	lothing, laundry, and dry cleaning	9. \$	195.00
10. Pe	ersonal care products and services	10. \$	65.00
11. M e	edical and dental expenses	11. \$	297.00
12. Tr	ransportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	
Do	o not include car payments.	12. \$	290.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14. C ł	haritable contributions and religious donations	14. \$	0.00
-	surance.		
	o not include insurance deducted from your pay or included in lines 4 or 20		
_	5a. Life insurance	15a. \$	0.00
	5b. Health insurance	15b. \$	0.00
	5c. Vehicle insurance	15c. \$	98.00
	5d. Other insurance. Specify:	15d. \$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 2		0.00
	pecify:	16. \$	0.00
	estallment or lease payments: 7a. Car payments for Vehicle 1	17a. \$	0.00
	7b. Car payments for Vehicle 2	17b. \$	0.00
	7c. Other. Specify:	176. \$ 17c. \$	
	7d. Other. Specify:		0.00
	· · ·		0.00
	our payments of alimony, maintenance, and support that you did not r educted from your pay on line 5, Schedule I, Your Income (Official Fori		0.00
	ther payments you make to support others who do not live with you.	\$	0.00
	pecify:	19.	<u> </u>
	ther real property expenses not included in lines 4 or 5 of this form or		
	Da. Mortgages on other property	20a. \$	0.00
20	0b. Real estate taxes	20b. \$	0.00
20	Oc. Property, homeowner's, or renter's insurance	20c. \$	0.00
20	Od. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20	De. Homeowner's association or condominium dues	20e. \$	0.00
1. O t	ther: Specify:	21. +\$	0.00
	alculate your monthly expenses		0.400.00
	2a. Add lines 4 through 21.	\$	3,160.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form		
22	2c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,160.00
23. C a	alculate your monthly net income.		
	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,450.00
	3b. Copy your monthly expenses from line 22c above.	23b\$	3,160.00
23	3c. Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	290.00
	o you expect an increase or decrease in your expenses within the year		r deareas hass:
		expect your mortgage payment to increase o	i decrease decause of a
Fo mo	o you expect an increase or decrease in your expenses within the year or example, do you expect to finish paying for your car loan within the year or do you odification to the terms of your mortgage? No. Explain here:		r decrease because of a

Fill in th	nis information to identi	fy your case:		
Debtor 1	Kristi Joy Harnes	SS		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA, ROME DIVISION	
Case number (if known)				☐ Check if this is a amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

-	t 1: Summarize Your Assets		
, ai	Cullinal Let Foul 7 cools	Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,520.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,520.00
Pai	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	6,736.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	2,400.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	97,900.00
	Your total liabilities	\$	107,036.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,450.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,160.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ot	her schedu	ıles.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, far	mily, or household

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 1 Harness, Kristi Joy Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____833.33

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	2,400.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	48,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	50,400.00

Fill in this in	formation to identify ye	our easo:			
Debtor 1	Kristi Joy Harnes				
JOSTOT 1	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Inited States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	T OF GEORGIA, ROME D	IVISION	
case number					
f known)				I	☐ Check if this is an amended filing
two married pe ou must file this otaining money	ople are filing together	, both are equally respo le bankruptcy schedule n connection with a banl			
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	lame of person				Petition Preparer's Notice, gnature (Official Form 119)
	ity of perjury, I declare	that I have read the sum	nmary and schedules filed	l with this declaration and	
X /s/ Kris	sti Joy Harness		X		
Kristi J	Joy Harness re of Debtor 1		Signature of	Debtor 2	
Date .	June 29, 2023		Date		

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	Fill in this	information to identi	fy your case:							
Dobte										
Debto	or 1	Kristi Joy Harne	Middle Name	Last Name						
Debto		First Name	Middle Nega	LastNama						
	se if, filing)	First Name	Middle Name	Last Name						
Unite	d States Bar	hkruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA, ROME DIVISI	ON					
Case (if know	number				_	Check if this is an mended filing				
Sta	complete ar	of Financial		e filing together, both are ed	qually responsible for supply					
		ore space is needed, a er every question.	attach a separate sheet to th	nis form. On the top of any a	additional pages, write your ।	name and case numbe				
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
I. V	What is your	current marital statu	s?							
	☐ Married ■ Not marr	ried								
2. [Ouring the la	ring the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. List	all of the places you liv	red in the last 3 years. Do not i	nclude where you live now.						
	Debtor 1:		Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					y property state or territory? co, Texas, Washington and Wis					
ı	■ No □ Yes. Mal	ka aura vau till aut Caba	adula III. Vaur Cadabtara (Offi	oial Farm 106U)						
		·	edule H: Your Codebtors (Offic	ciai Form 106H).						
Part 2	Explain	n the Sources of Your	Income							
F	ill in the tota	I amount of income you	nployment or from operating u received from all jobs and a lave income that you receive to	II businesses, including part-		ar years?				
	□ No									
I	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,900.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

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De	btor 1 H	arness, Kr	isti Joy		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December :	31, 2022)	■ Wages, commissions, bonuses, tips	\$36,000.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
		dar year bei December :		■ Wages, commissions, bonuses, tips	\$65,000.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	you are fili	ing a joint cas	se and you ha	ons; rental income; interest; div ve income that you received too me from each source separatel	gether, list it only once under l	Debtor 1.	and gambling	g and lottery winnings. I
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for B	Bankruptcy			
6.	Are eithe ☐ No.	Neither De	ebtor 1 nor D	s debts primarily consumer of tebtor 2 has primarily consur personal, family, or household p	mer debts. Consumer debts	are defined in 11 U	.S.C. § 101(8) as "incurred by an
		□ No.	Go to line 7					
		Yes	creditor. Do payments to	each creditor to whom you paid o not include payments for don o an attorney for this bankrupto on 4/01/25 and every 3 years a	nestic support obligations, su y case.	ich as child suppor	t and alimony	
	■ Yes.	Debtor 1 c	or Debtor 2 o	r both have primarily consur re you filed for bankruptcy, did	mer debts.	•		
		■ No.	Go to line 7	7 .				
		□ _{Yes}		each creditor to whom you paid or domestic support obligations ptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for
7.	Insiders in which you business	nclude your re are an office	elatives; any g er, director, pe	bankruptcy, did you make a leneral partners; relatives of any erson in control, or owner of 20% rietor. 11 U.S.C. § 101. Include	payment on a debt you ow general partners; partnership or more of their voting secu	red anyone who wos of which you are rities; and any mana	a general par aging agent, i	tner; corporations of ncluding one for a
	■ No □ Yes.	List all paym	ents to an ins	ider.				
	Insider's	Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Reason for	this payment

Deb	otor 1 Harness, Kristi Joy		Page 32 of 44 Case	o/29/23 18.1	13:33 DE	esc Main	
	· · · · · · · · · · · · · · · · · · ·						
	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosig		nents or transfer an	y property on ac	count of a deb	ot that benefited an	
	■ No□ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures	•				
	Within 1 year before you filed for bankruptc List all such matters, including personal injury cand contract disputes.						
	■ No □ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below		rty repossessed, for	eclosed, garnisł	ned, attached,	seized, or levied?	
	□ No. Go to line 11.■ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the property	
		Explain what happened					
	Exeter Finance LLC PO Box 166008	2012 Mini Cooper			June 27, 2023 \$5,000.00		
	Irving, TX 75016-6008	■ Property was reposses	ssed.				
		☐ Property was foreclose					
		☐ Property was garnishe					
		☐ Property was attached	I, seized or levied.				
11.	Within 90 days before you filed for bankrupi accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fina	ncial institution,	set off any am	ounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount	
	Creditor Name and Address	Describe the action the	Creditor took	takei		Amount	
	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an		rty in the possession	n of an assignee	for the benefi	t of creditors, a	
	■ No □ Yes						
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrupt	cy, did you give any gifts	with a total value of	f more than \$600	per person?		

No

person

Address:

Describe the gifts

Value

Dates you gave the gifts

 \square Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per

Person to Whom You Gave the Gift and

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Case number (if known)

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution.									
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value				
Par	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankru or gambling?	ptcy or s	since you filed for bankruptcy, did yo	ou lose anyth	ing because of theft	, fire, other disaster,				
	■ No □ Yes. Fill in the details.									
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. Lice claims on line 33 of Schedule A/B: P	ist pending	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers	.								
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition produced any attorneys.	reparing	g a bankruptcy petition?			ty to anyone you				
	NoYes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment				
	Hurtt and Johnson, LLC PO Box 1304 Dalton, GA 30722-1304		-0- Attorney Fees \$313 Court Costs	June 29, 2023	\$313.00					
	CC Advising, Inc. 721 Washington Ave Ste 305 Bay City, MI 48708-5724		Credit Counseling		June 29, 2023	\$10.00				
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that y	litors or	to make payments to your creditors?		transfer any proper	ty to anyone who				
	■ No									
	Yes. Fill in the details. Person Who Was Paid		Description and value of any prope	art.	Data navment or	Amount of				
	Address		transferred	n ty	Date payment or transfer was made	payment				
18.	Within 2 years before you filed for bankri transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already listed. No Yes. Fill in the details.	r busine made as	ess or financial affairs? security (such as the granting of a secu							
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made				

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Debtor 1 Harness, Kristi Joy

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Debt	or 1	Harness, Kristi Joy			Case nun	nber (if known)			
ļ	oenef	ficiary? (These are often called asset-prod	tection devices.)						
	_	No							
		Yes. Fill in the details.	December and	ralisa af tha mua		of a was al	Data Transfer was		
	Nam	e of trust	Description and v	raiue of the pro	perty trans	sterred	Date Transfer was made		
Part	8:	List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Sto	orage Units	¥			
	sold,	n 1 year before you filed for bankruptc moved, or transferred?	•				, ,		
	house	de checking, savings, money market, o es, pension funds, cooperatives, assoc No				; shares in banks, credit	unions, brokerage		
ı	□ '	Yes. Fill in the details.							
		e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
 	_ `	No Yes. Fill in the details.							
		e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe	the contents	Do you still have it?		
22. I	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
I		No							
	□ `	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		to it?	Address (Number, Street, City, State		the contents	Do you still have it?		
Part	9:	Identify Property You Hold or Control	for Someone Else						
	Do yo some	ou hold or control any property that so cone.	meone else owns? Inclu	de any propert	y you borr	owed from, are storing f	or, or hold in trust for		
 	_ `	No Yes. Fill in the details.							
		er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, Code)		Describe	the property	Value		
Part	10:	Give Details About Environmental Info	ormation						
For #	יום או	rpose of Part 10, the following definition							
or u	.e pu	i poss of Fart 10, the following definition	ло арргу.						
	Envir	onmental law means any federal, state,	or local statute or requ	lation concern	ina pollutio	n, contamination, releas	ses of hazardous or		

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Harness, Kristi Joy Case number (if known)

Deb	otor 1	Harness, Kristi Joy			C	ase number (if known)			
24.	Has	any governmental unit notified you that	you may be	liable or potentially liable	e und	ler or in violation of an environmer	ital law?		
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		nmental unit SS (Number, Street, City, State a e)	and	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit of a	any release o	of hazardous material?					
			•						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		nmental unit SS (Number, Street, City, State a e)	and	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adm	inistrative p	roceeding under any envi	ironr	mental law? Include settlements an	d orders.		
	_	No							
		Yes. Fill in the details.							
		se Title se Number	Name	or agency SS (Number, Street, City, State Code)	N	ature of the case	Status of the case		
Par	t 11:	Give Details About Your Business or C	Connections	to Any Business					
		nin 4 years before you filed for bankrupto			ny of	the following connections to any h	usiness?		
21.	*****		•		-		damess:		
	 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 								
	☐ A partner in a partnership								
		☐ An officer, director, or managing exe	cutive of a c	orporation					
		☐ An owner of at least 5% of the voting	or equity se	curities of a corporation					
		No. None of the above applies. Go to Pa	art 12.						
		Yes. Check all that apply above and fill	in the details	s below for each business	s.				
		siness Name	Describe th	ne nature of the business		Employer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper			Do not include Social Security number or ITII			
						Dates business existed			
28.		nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you g	ive a financial statement	to ar	nyone about your business? Includ	e all financial		
		No							
		Yes. Fill in the details below.	5						
		me dress mber, Street, City, State and ZIP Code)	Date Issued						
Par	t 12:	Sign Below							
true bani 18 U	and krupt J.S.C	ad the answers on this Statement of Final correct. I understand that making a false toy case can result in fines up to \$250,000. §§ 152, 1341, 1519, and 3571.	statement,	concealing property, or o	btair	ning money or property by fraud in	t the answers are connection with a		
		iti Joy Harness Joy Harness	Sic	gnature of Debtor 2					
		re of Debtor 1	J.						
Dat	e <u> </u>	June 29, 2023	_ Da	te					

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Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No
□ Yes
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Debtor 1 Harness, Kristi Joy

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia, Rome Division

In re	e Harness, Kristi Joy	Case No.		
	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR I	DEBTOR	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankru be rendered on behalf of the debtor(s) in contemplation of or in connection with the	ptcy, or agreed to be pa	d to me, for services rendered of	r to
	For legal services, I have agreed to accept	\$	4,959.00	
	Prior to the filing of this statement I have received	\$	0.00	
	Balance Due	\$	4,959.00	
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation with any other perfirm.	erson unless they are me	mbers and associates of my law	
	☐ I have agreed to share the above-disclosed compensation with a person or persopy of the agreement, together with a list of the names of the people sharing i			A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all a	spects of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in b. Preparation and filing of any petition, schedules, statement of affairs and plan v c. Representation of the debtor at the meeting of creditors and confirmation hearing d. [Other provisions as needed] If this is a chapter 13, attorney certifies that attorney provided Responsibilities Statement. Furthermore, Debtor directs the Tunpaid fees and costs upon conversion or dismissal in according 	which may be required; ng, and any adjourned he debtor(s) with a cop rustee to disburse for	earings thereof; y of the Rights & unds to the attorney to pay	
6.	By agreement with the debtor(s), the above-disclosed fee does not include the followard formula for this is a chapter 7, adversary proceedings, appellate practice non-routine contested matters.		s to avoid liens, and	
	If this is a chapter 13, the following are considered non-base s	services and are cha	rged as follows:	
	Post-Confirmation Motion to Add / Allow Late Claim - \$200.00 Post-Confirmation Plan only modification - \$300.00 Post-Confirmation Plan plus schedules modification - \$300.00 Post-Confirmation MFRFS undisputed work-out / consent order			

Motion to Retain Funds - \$400.00

Debtor Application to Employ Professional - \$400.00

Debtor Motion to Sell / Enter Into Contract - hourly

Debtor Motion to Refinance / Incur Debt / Loan Modification - \$500.00

Post-Confirmation, Post-Bar Date Review Objection to Claim - hourly Post-Confirmation Stay Violation / Motion for Sanctions - hourly

Debtor Motion to Approve Compromise / Settlement / Declare Lien Satisfied - \$500.00

Motion to Sever / Dismiss one debtor / Reopen / Reconsider Dismissal - \$500.00

Motion for Hardship Discharge - \$500.00

Post-Confirmation MFRFS disputed - hourly

Motion to Suspend Payments - \$300.00

Post-Bar Date Trustee Motion to Dismiss / Convert / Response to Supp. Report - \$300.00

Adversary or Motion to Strip Lien - hourly

Home / Mobile home cramdown - hourly

Business Case Designation - \$1,500.00

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In re	Harness, Kristi Joy	Case No.	

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

(Continuation Sheet)

Audit by US Trustee - \$800.00

Contested confirmation hearings (if beyond normal scope of chapter 13 practice) - hourly Other Adversary or evidentiary proceedings, if accepted - hourly Appellate Practice, if accepted - hourly

*Reimbursement of Costs, including, without limitation, first class mail at the rate of \$1.00/notice

**Hourly rate is \$360/hr attorneys; \$80/hr staff

In addition to the chapter 13 fee structure and in the event the case is dismissed or converted, attorney and client agree for attorney to receive unpaid fees from the trustee in the amount of: (i) \$2,500 if prior to confirmation; or (ii) the allowed fees if post-confirmation.

Capital One Bank USA N.A Attn: Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Credit One Bank Attn: Bankruptcy PO Box 98873 Las Vegas, NV 89193-8873

Dept of Ed/Nelnet 121 S 13th St Lincoln, NE 68508-1904

Erlanger Heart & Lung 979 E 3rd St # C-520 Chattanooga, TN 37403-2136

Erlanger Hospital 975 E 3rd St Chattanooga, TN 37403-2147

Erlanger Orthoapedics 975 E 3rd St Chattanooga, TN 37403-2147

Exeter Finance LLC PO Box 166008 Irving, TX 75016-6008

Georgia Department of Revenue Arcs Bankruptcy 1800 Century Blvd NE Ste 9100 Atlanta, GA 30345-3202

Hamilton Medical Center PO Box 1168
Dalton, GA 30722-1168

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Synchrony Bank
Attn: Bankruptcy Dept.
PO Box 965061
Orlando, FL 32896-5061

Case 23-40934-bem Doc 1 Filed 06/29/23 Entered 06/29/23 18:13:33 Desc Main Document Page 41 of 44 United States Bankruptcy Court Northern District of Georgia, Rome Division

IN RE:		Case No
Harness, Kristi Joy		Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) hereby v	erify(ies) that the attached matrix listing of	creditors is true to the best of my(our) knowledge.
Date: June 29, 2023	Signature: /s/ Kristi Joy Harness	
	Kristi Joy Harness	Debtor
Date:	Signature:	

Joint Debtor, if any

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Fill in this information to identify your case:						
Debtor 1	Kristi Joy Harness					
Debtor 2 (Spouse, if filing)						
United States Ba	ankruptcy Court for the:	Northern District of Georgia, Rome Division				
Case number (if known)						

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

page.	s, write your name and case number (ii known).							
Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one or	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 1 6	I in the average monthly income that you received from al 1(10A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total by in the same rental property, put the income from that property	month perion 6. Fill in the	od would he result.	be March 1 to Do not include	through de any i	August 31. If the amo	unt of your monthly income v han once. For example, if bo	aried during the
					_	column A ebtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and com	nmissio	ns (before a	all \$	833.33	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e paymen	ts from a	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly partial of you or your dependents, including child support from an unmarried partner, members of your household, roommates. Do not include payments from a spouse. I listed on line 3	t. Include , your dep	regular endents	contributior , parents, a	ns nd	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy her	e -> \$	0.00	\$	
6.	Net income from rental and other real property	Debtor '						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	Φ.	0.00	Copy her	e -> \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor	Harness, Kristi Joy				Case number	er (<i>if kno</i> w	<i>'n</i>)		
					Column A Debtor 1		Column B Debtor 2	or	
7.	Interest, dividends, and royalties				\$	0.0	\$		
	Unemployment compensation				\$	0.0	<u> </u>		
	Do not enter the amount if you contend that the Social Security Act. Instead, list it here:	ne amount received was	a benefit under	the			_		
	For you	\$	0.00						
	For your spouse	\$							
;	Pension or retirement income. Do not included the Social Security Act. Also, except as include any compensation, pension, pay, and Government in connection with a disability, or a member of the uniformed services. If you re 61 of title 10, then include that pay only to the of retired pay to which you would otherwise b title 10 other than chapter 61 of that title.	s stated in the next sente uity, or allowance paid b ombat-related injury or di eceived any retired pay p e extent that it does not e	ence, do not by the United Sta isability, or death paid under chapte exceed the amou	tes of er nt	\$	0.00	D \$		
 	Income from all other sources not listed a Do not include any benefits received under th as a victim of a war crime, a crime against hu terrorism; or compensation, pension, pay, and States Government in connection with a disal death of a member of the uniformed services separate page and put the total below.	ne Social Security Act; pa imanity, or international c nuity, or allowance paid b bility, combat-related inju	ayments received or domestic by the United ury or disability, o	d					
					\$	0.0	<u> </u>		
					\$	0.0	<u> </u>		
	Total amounts from separate pages	, if any.		+	\$	0.0	\$		
	Calculate your total average monthly inco each column. Then add the total for Column 2: Determine How to Measure Your D	n A to the total for Colum	nn B.		833.33	+ \$			833.33
40		form the 44							
12.	Copy your total average monthly income Calculate the marital adjustment. Check of	nne 11.						\$	833.33
10.	You are not married. Fill in 0 below.	110.							
	You are married and your spouse is filin	a with you Fill in 0 below	A/						
	You are married and your spouse is not		w.						
	Fill in the amount of the income listed i		at was NOT regi	ularl	v paid for th	ne hous	ehold expenses	s of you or	vour dependent
	such as payment of the spouse's tax lia	bility or the spouse's sup	pport of someone	e oth	er than you	or your	dependents.		
	Below, specify the basis for excluding the a separate page.		unt of income de	vote	d to each pu	ırpose.	If necessary, lis	t additional	adjustments on
	If this adjustment does not apply, enter	J below.	e						
						_			
			+\$			_			
	Total		\$		0.0	00	Copy here=>		0.00
14.	Your current monthly income. Subtract	line 13 from line 12.						\$	833.33
15.	Calculate your current monthly income	for the year. Follow the	ese steps:						
	15a Copy line 14 hores							\$	833.33
								· —	

Debtor 1

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Debto	or 1	Harı	ness, Kristi Joy		Case number (if known)	
		М	ultiply line 15a by 12 (the number of months i	n a year).		x 12
	15	b. Th	ne result is your current monthly income for the	year for this part of the fo	orm	\$9,999.96
16.	Cald	culate	the median family income that applies to y	ou. Follow these steps:		
	16a.	Fill in	the state in which you live.	GA		
	16b	. Fill in	the number of people in your household.	1		
	16c.	To fi	the median family income for your state and nd a list of applicable median income amount actions for this form. This list may also be avail	s, go online using the lin		\$ 60,490.00
17.	Hov	v do tl	ne lines compare?			
	17a.		Line 15b is less than or equal to line 16c. <i>U.S.C.</i> § <i>1325(b)(3)</i> . Go to Part 3. Do NO		•	
	17b	. 🗆	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 al	ulation of Your Disposa	* *	ŭ
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	y you	r total average monthly income from line 1	11.		\$ 833.33
19.	that inco	calcul me, c	ne marital adjustment if it applies. If you are ating the commitment period under 11 U.S.C. opy the amount from line 13. marital adjustment does not apply, fill in 0 or	§ 1325(b)(4) allows you to		-\$0.00
	19b	. Subt	ract line 19a from line 18.			\$833.33
20.	Cald	culate	your current monthly income for the year	. Follow these steps:		
	20a.	Copy	line 19b			\$833.33
		Multi	ply by 12 (the number of months in a year).			x 12
	20b	. The i	result is your current monthly income for the ye	ear for this part of the forn	n	\$9,999.96
	20c.	. Сору	the median family income for your state and s	ize of household from line	e 16c	\$60,490.00
	21.	How	do the lines compare?			
			Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	se ordered by the court, o	n the top of page 1 of this form, check b	oox 3, The commitment period
			Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	less otherwise ordered by	the court, on the top of page 1 of this for	orm, check box 4, The
Part	4:	Sig	n Below			
	Bys	igning	here, under penalty of perjury I declare that the	e information on this state	ement and in any attachments is true ar	d correct.
X			ti Joy Harness			
			oy Harness e of Debtor 1			
			ne 29, 2023			
	16		I/DD / YYYY			
	•		cked 17a, do NOT fill out or file Form 122C-2		hat form convinces a secretarian and the form	nome from line 4.4 abava
	II yC	u cne	cked 17b, fill out Form 122C-2 and file it with	una ionni. On line 39 of t	nacionii, copy your current monthly inc	Joine Holli lille 14 above.